

Inspection No. 061611AO701

Jon Yager
Twin Orchards Farms Inc.
4695 Middle Settlement Road
New Hartford, NY 13413

Inspection Date June 16, 2011

Specialists Narrative:

OPENING CONFERENCE

On June 16, 2011 I conducted Certified Applicator Records and Agricultural Use Observation inspections of Twin Orchards Farms Inc., located at 4695 Middle Settlement Road, New Hartford, NY 13413. I presented my credentials and issued a notice of inspection to Mr. Jon Yager, the secretary. I explained the purpose of my visit was to check compliance with New York State Laws pertaining to pesticides and the Federal Worker Protection Standard (WPS). Mr. Yager's brother, Lloyd Yager, was also present during the inspection.

INSPECTION

PESTICIDE CERTIFICATION

Mr. Jon Yager (Certification ID# P6862523, category 22, expiration date 5/21/12) and Mr. Lloyd Yager (Certification ID# P6714628, category 22, expiration date 5/21/12) are the only certified applicators at the establishment. They stated that they do not have uncertified individuals working under their certifications.

USE OBSERVATION

I asked to see the facility's application records. Mr. Lloyd Yager provided me with the records and we reviewed them together. At this time I discussed the record keeping requirements with regard to maintaining method of application and recording the correct EPA registration numbers. Both Mr. Lloyd Yager and Mr. Jon Yager understood these requirements and stated that they would comply in the future.

I recorded the information from an application done on 6/5/2011. This application was done with a tank mix of Captan 80 WDG (EPA# 66222-58-66330), Carbaryl 4L (EPA# 34704-447) and Yellowjacket Wettable Sulfur (EPA# 6325-13). Captan 80 WDG (EPA# 66222-58-66330) was mixed at a rate of 4.5 lbs. /acre and the label rate is 5 lbs. /acre. Carbaryl 4L (EPA# 34704-447) was mixed at a rate of 1 qt/acre and the label rate is 1.5-3 qt. /acre. Yellowjacket Wettable Sulfur (EPA# 6325-13) was mixed at a rate of 6 lbs/acre and the label rate was 7.5 lbs.-59 lbs. /acre. The products were applied using an airblast sprayer. After reviewing the labels and interviewing Mr. Lloyd Yager this application appears to be in compliance.

The facility's pesticide storage is located in a shed near the packing house. The pesticide containers were properly labeled. The pesticide mixing/loading area is located outside of the packing house. The water source for the establishment is municipal and pond water. There is an effective backflow prevention device. Pesticide containers are recycled or returned to the manufacturer when emptied. At this time I discussed the regulations pertaining to burning of

pesticide containers with Mr. Lloyd Yager. Mr. Yager understood these requirements and stated that he would comply in the future.

WORKER PROTECTION STANDARD:

We then began the WPS portion of our inspection. Mr. Lloyd Yager and Mr. Jon Yager are the only handlers at this facility. There has been 1 worker at the establishment over the last 30 days. There are 0 permanent workers at this facility and up to 12 seasonal workers.

I asked to see the facility's Central Posting Area. It was in the packing house outside of an office. The approved poster was taped on the wall and readily visible, and the emergency information was filled in. A record of applications was posted near the poster with the required information. Mr. Lloyd Yager stated that this area remains unlocked during business hours.

This facility has not had any pesticide exposure incidents. If there was an incident either Mr. Jon Yager or Mr. Lloyd Yager would be responsible for transportation to and information exchange with the medical facility.

Mr. Lloyd Yager stated that the workers on the establishment are trained as soon as they are hired and annually after that, which he verified by producing rosters. The training is conducted by either Mr. Lloyd Yager or Mr. Jon Yager and includes an EPA approved video tape. At this time I gave Mr. Lloyd Yager a copy of the EPA approved training DVD.


Next I inspected the facility's decontamination areas. Decontamination equipment, which included soap and single use towels, was stored in a metal box outside of the pesticide storage area. There was water available at this location as well. Workers are provided portable decontamination supplies while conducting their tasks. Eyewash was readily available at the mixing and loading site. Necessary PPE was available. I discussed storing PPE and eyewash outside of the pesticide storage area and keeping them at a safe temperature for use.

Mr. Lloyd Yager stated that workers are prohibited in treated areas until the REI has expired. Workers are notified of applications by Mr. Lloyd Yager using oral notification. The oral notifications are given to workers in English and translated into Spanish for them by the bilingual employees. When required by the label, Mr. Lloyd Yager uses the approved WPS warning signs which are posted at all entrances no sooner than 24 hours before the application and taken down within 3 days after the REI.

I was unable to conduct a worker interview during this inspection. The only worker employed at this facility at the time of the inspection was not onsite during the inspection. A handler interview was not conducted as both handlers employed at the facility were present during the inspection.

CLOSING DISCUSSION

I reviewed the inspection forms with Mr. Lloyd Yager and Mr. Jon Yager and gave Mr. Jon Yager copies of each. Mr. Jon Yager signed the WPS inspection form and the Inspection Report Cover Sheet. At the end of the inspection I gave Mr. Jon Yager a new approved WPS poster, a How to Comply manual and copies of Article 33 and 6 NYCRR Part 325.


Amy Ortlieb PCS I
Region6

Attachments

Inspection Forms:

Inspection Report Cover Sheet
Notice of Inspection
Pesticide Applicator/Business/Use Inspection
Worker Protection Standard Inspection



NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID AND HAZARDOUS MATERIALS • BUREAU OF PESTICIDES MANAGEMENT
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INSPECTION REPORT COVER SHEET

Inspection #: <u>0616140701</u>	Name of Person Contacted: <u>Jon Yager</u>
Name of Business: <u>Twin Orchards Farms Inc.</u>	Official Position: <u>Secretary</u>
Street Address: <u>4695 Middle Settlement Rd</u>	Post Office Address: <u>4695 Middle Settlement Rd</u>
City/State/Zip Code: <u>New Hartford / NY / 13413</u>	City/Village/Township: <u>New Hartford</u>
Telephone Number: <u>736-5883</u>	County: <u>Orinda</u>

Inspector's Initials	Name of Inspection Form	Form Number
<u>ad</u>	Notice of Inspection	NOI
<u>ad</u>	Pesticide Applicator/Business/Use Inspections	USE
<u>ad</u>	Worker Protection Standard Inspection <u>(4 sheets)</u>	WPS
	Liquid Termiticide Use Checklist	TER
	Ornamental and Turf Checklist	T&O
	Voluntary Statement	VOL
	Receipt for Samples	SAM
	Market Place/Restricted Dealers Records Inspection	MKT
	Market Place/Restricted Dealer Records Inspection Continuation Sheet	MPC
	Quarantine Order	QRN
	Quarantine Order Release	QOR
	Experimental Use Permit Checklist	EUP
	Authorization for Medical Record Disclosure	MED

Inspector's Signature: [Signature] Number: A02 Date: 6/16/11

Inspection Acknowledgment: I acknowledge receiving a copy of the above listed inspection documents initialed by the inspector.

Signature: [Signature] Date: JUNE 16 2011

Print Name: Jon E Yager



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☒ **NOTICE OF INSPECTION**
☐ **USE/MISUSE INSPECTION**

INSPECTION # <u>061011A0701</u>	DATE <u>6/16/11</u>	TIME <u>9:57</u> <input checked="" type="checkbox"/> AM <input type="checkbox"/> PM	REGION <u>6</u>
NAME OF INDIVIDUAL <u>Jon Yager</u>		TITLE <u>Secretary</u>	
NAME OF FIRM (Note if corporation, partnership, dba, etc) <u>Twin Orchards Farms Inc.</u>			
ADDRESS This is the address of the: <input checked="" type="checkbox"/> INSPECTION SITE <input type="checkbox"/> FIRM <input type="checkbox"/> INDIVIDUAL <u>4695 Middle Settlement Rd.</u>			
CITY / VILLAGE <u>New Hartford</u>		STATE <u>NY</u>	ZIP <u>13413</u>
TOWNSHIP <u>New Hartford</u>	COUNTY <u>Oneida</u>	PHONE <u>315-736-5883</u>	

REASON FOR INSPECTION

- ☐ For the purpose of inspecting and obtaining samples of any pesticides or devices packaged, labeled and released for shipment, samples of any containers or labeling for such pesticides or devices in places where pesticides or devices are produced, or held for distribution or sale.
- ☒ For the purpose of inspecting and obtaining samples of mandated records.
- ☐ For the purpose of inspecting the use of pesticides and sampling pesticides in use to determine if they are being used in compliance with appropriate laws and rules and regulations.
- ☒ For the purpose of inspecting sites where pesticides are being used to collect data on the use of pesticides and to determine whether pesticides are being used in compliance with appropriate laws and rules and regulations.
- ☒ Other WPS

VIOLATION SUSPECTED

None

CONSENT USE/MISUSE

Voluntary Consent Necessary to Enter for Inspection and/or Sampling.

- ☐ The undersigned hereby voluntarily consents to an inspection of _____ of which I am the owner, Agent, or Person-in-Charge, for the purposes of gathering information and/or samples in connection with the administration and enforcement of Article 33 and Section 15-0313 of the Environmental Conservation law relating to pesticides. I understand that I have the right to refuse consent to this entry.

SIGNATURE

TITLE

DATE

This inspection is being performed under authority granted by Article 33 and Section 15-0313 of Article 15 of the Environmental Conservation law relating to pesticides and the Federal Insecticide, Fungicide and Rodenticide Act as amended (7 U.S.C. 136 et seq.).

INSPECTOR INFORMATION

NAME <u>Amy Orlieb</u>	TITLE <u>PCS 1</u>	ID NUMBER <u>A07</u>	PHONE NUMBER <u>793-2554</u>
SIGNATURE <u>Amy Orlieb</u>	OFFICE LOCATION <u>207 Genesee St. Utica NY 13501</u>	ACCOMPANIED BY	

PESTICIDE APPLICATOR/BUSINESS/USE INSPECTIONS

INSPECTION NUMBER 0101LA0701						FIRM/FACILITY/PERSON INTERVIEWED <u>Twin Orchard's Farms Inc</u>								EQUIPMENT TYPE/SIZE <u>Narrow room</u>			
TYPE OF INSPECTION: [] Business/Agency [<input checked="" type="checkbox"/>] Applicator						SITE OF INSPECTION <u>4695 Middle Settlement Rd</u>											
[] Non-agricultural use [<input checked="" type="checkbox"/>] Agricultural use																	
BUSINESS REG. NO./EXPIRATION DATE <u>n/a</u>						INSURANCE COMPANY/EXPIRATION DATE <u>n/a</u>											
APPLICATOR NAME/CERTIFICATION TYPE						CERTIFICATION ID				CATEGORY/EXPIRATION				SUPERVISED BY			
<u>Son Yager / private</u>						<u>P168102523</u>				<u>22/5/11/12</u>				<u>na</u>			
<u>Lloyd Yager /private</u>						<u>P10714628</u>				<u>22/5/11/12</u>				<u>na</u>			
DATE/TIME/WEATHER CONDITIONS DURING APPLICATION <u>6/5/11</u>						CROP <u>apples</u>				SITE/SIZE				TARGET PESTS <u>plant bug, plum curculio</u> <u>Scab, mildew</u>			
PESTICIDE NAME/EPA REG NO.						METHOD OF APPLICATION				CLASSIFICATION		FORMULATION		LABEL RATE		OBSERVED RATE	
<u>Captan SD WDG 158-106330</u>						<u>airblast</u>						<u>lb</u>		<u>5 lbs/acre</u>		<u>4.5 lbs/acre</u>	
<u>Oribanyl 4L 34704-447</u>						<u>!!!</u>				<u>Res</u>		<u>"B"</u>		<u>1.5 - 3 lb/acre</u>		<u>18+ lb/acre</u>	
<u>Yellow packet wettable sulfur / 6325-13</u>														<u>- 5 lb/acre 10 lb</u>			
LABEL/EQUIPMENT REQUIREMENTS		REFERENCE SECTION		Yes No NA		APPLICATOR REQUIREMENTS		REFERENCE SECTION		Yes No NA							
Label Rate Followed		325.2(b)		<input checked="" type="checkbox"/>		Apprentices Properly Supervised		325.7(d)		<input checked="" type="checkbox"/>							
Target Pests on Label		325.2(b)		<input checked="" type="checkbox"/>		Apprentices Trained/Documented		325.10(a)		<input checked="" type="checkbox"/>							
PPE/Cautionsary Labeling Followed		325.2(b)		<input checked="" type="checkbox"/>		Apprentice Variance Approved		325.10(b)		<input checked="" type="checkbox"/>							
Preharvest Interval/REI per Label		325.2(b)		<input checked="" type="checkbox"/>		I. D. Card in Possession During Use		325.7(a)		<input checked="" type="checkbox"/>							
Crop/Area Treated per Label		325.2(b)		<input checked="" type="checkbox"/>		Label in Possession During Use		325.2(d)		<input checked="" type="checkbox"/>							
Pesticide Containers Properly Labeled		33.1301(1)(b)		<input checked="" type="checkbox"/>		Notification Requirements Met		33-0905(5)		<input checked="" type="checkbox"/>							
Service Containers Properly Labeled		33.1301(1)(b)		<input checked="" type="checkbox"/>		REPORTS/RECORDS		33-1205(1)		Yes No NA							
Containers Properly Rinsed and Disposed		325.4(a)		<input checked="" type="checkbox"/>		EPA Reg. No.				<input checked="" type="checkbox"/>							
Backflow Prevention/Air Gap Present		325.2(c)		<input checked="" type="checkbox"/>		Product Name				<input checked="" type="checkbox"/>							
Proper Stickers on Equipment/Vehicles		325.26				Quantity				<input checked="" type="checkbox"/>							
Equipment Properly Calibrated				<input checked="" type="checkbox"/>		Date Applied				<input checked="" type="checkbox"/>							
Storage Locked/Containers Secure				<input checked="" type="checkbox"/>		Address				<input checked="" type="checkbox"/>							
Warning Signs Posted				<input checked="" type="checkbox"/>		Place of Application				<input checked="" type="checkbox"/>							
Location of Container Disposal:		<u>recycling/return to manufacturer</u>				Dosage Rate				<input checked="" type="checkbox"/>							
Location of Pesticide Storage:		<u>shed</u>				Method of Application				<input checked="" type="checkbox"/>							
Water Source:		<u>pond/municipal</u>				Target Organism/Crop Treated				<input checked="" type="checkbox"/>							
Pesticide Mixing Area:		<u>outside packing house</u>				Records Kept 3 Years				<input checked="" type="checkbox"/>							
REMARKS: <u>discussed record keeping regarding correct EPA #'s</u>																	
INSPECTOR'S SIGNATURE <u>Amy Dutcher</u>						DATE AND TIME INSPECTED <u>6/16/11 11:52</u>											



WORKER PROTECTION STANDARD INSPECTION

Inspection # <u>061611A0701</u>	Date: <u>6/16/11</u>	Inspection: <input type="checkbox"/> Unannounced <input checked="" type="checkbox"/> Appointment
Firm/Farm Name <u>Twin Orchards Farms Inc.</u>	Inspection Type: Tier I <input checked="" type="checkbox"/> or Tier II <input type="checkbox"/>	
Type of Establishment: (check all applicable): <input checked="" type="checkbox"/> Farm <input type="checkbox"/> Greenhouse <input type="checkbox"/> Nursery <input type="checkbox"/> Family establishment <input type="checkbox"/> Research <input type="checkbox"/> Forest		
Approx. total area of establishment: <u>260 acres</u>	Principal crops: <u>apples / sweet corn / peaches</u>	
# of certified applicators with establishment: <u>2</u>	Name of person(s) directing/controlling pesticide use: <u>Jon / Lloyd Yager</u>	
Who applies pesticides? (check all applicable): <input checked="" type="checkbox"/> Owner <input type="checkbox"/> Employee <input type="checkbox"/> Custom Applicator		
Note: For data in this block, estimates provided by the establishment are sufficient.		
# present at this inspection:	workers <u>0</u>	handlers <u>2</u>
	# of permanent employees:	workers <u>0</u> handlers <u>2</u>
1. # present during last pesticide application:	workers <u>1</u>	handlers <u>2</u>
2. or for the last 30 days: (circle one)	# of seasonal employees:	workers <u>12</u> handlers <u>0</u>

INFORMATION AT A CENTRAL LOCATION

40 CFR 170.122/135

How to Comply Manual

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- NA ☒ N Is the approved SAFETY POSTER displayed? 23
- NA ☒ N Is EMERGENCY MEDICAL INFORMATION displayed? (name, address & telephone number) 24
- NA ☒ N Is the site LOCATED where it can be readily seen and read by workers & handlers? 24
- NA ☒ N Are workers & handlers INFORMED of the location and are they allowed ACCESS to the site? 24
- NA ☒ N Does the information remain LEGIBLE while posted? 24
- NA ☒ N Is the following APPLICATION INFORMATION displayed? -Location and Description of the treated area; - Product Name; -EPA REG #; - Active Ingredient(s) of the pesticide; -Time & Date of application; - REI (restricted entry interval) 23

Comments (explain NA): _____

PESTICIDE EXPOSURE INCIDENTS/EMERGENCY ASSISTANCE

40 CFR 170.160

- How are incidents reported for employees who become sick/injured by pesticides? tell Jon / Lloyd
- NA ☒ N Is prompt transportation to emergency medical facility available for employees who become sick/injured by pesticides? 36
- NA ☒ N Is information provided to medical personnel regarding the pesticide to which employees may have been exposed? 36

Who is the person responsible for providing transportation and pesticide information? Jon / Lloyd

Y ☒ Have there been any pesticide exposure incidents on this farm? If yes, give details: _____

Comments (explain NA): _____

EMPLOYER/CUSTOM APPLICATOR INFORMATION EXCHANGE ☒ NA (no custom applications) 40 CFR 170.124 & 170.224

- NA Y N Does the ag establishment notify the custom applicator regarding the location of treated areas and REIs? 34
- NA Y N Does custom applicator notify the ag establishment of required application information before the application? 33

How is the information exchanged? When/with whom? _____

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PESTICIDE SAFETY TRAINING ASSURANCE

40 CFR 170.130

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WORKERS: (Applies to workers who are NOT certified applicators or trained handlers)

- NA Y N Does Ag Employer ASSURE that workers have been trained within the last five years? 25
- Y NA Y N Does Ag Employer ASSURE that workers have been trained *before EARLY ENTRY activities* during an REI? 25
- NA Y N Is the Ag Employer able to VERIFY that the required PESTICIDE SAFETY INFORMATION was provided to workers *before entry into any area on an ag establishment* where WPS pesticides have been applied within the last 30 days? 26
- NA Y N Does Ag Employer ASSURE that workers have received the required ADDITIONAL TRAINING *before the sixth day of entry into any area on an ag establishment* where WPS pesticides have been applied within the last 30 days? 25/26

HANDLERS: (Applies to handlers who are NOT certified applicators or certified crop advisers) **40 CFR 170.230**

- Y NA Y N Does Ag Employer ASSURE that handlers have been trained within the last five years? 25/26
- Y NA Y N Does Ag Employer ASSURE that handlers have been trained *before performing any handling task*? 25/26

How is training verified for both workers and handlers? _____

Comments (explain NA): _____

PESTICIDE SAFETY TRAINING PROGRAM NA (if workers trained elsewhere) **40 CFR 170.130/230**

- NA Y N **WORKERS & HANDLERS:** Is the information presented in a manner that the workers & handlers can understand (such as through a translator & using nontechnical terms & presenter answers questions)? 27
- NA Y N **WORKERS:** Does the PESTICIDE SAFETY INFORMATION meet the criteria listed in 170.130(c)? 26
- NA Y N **WORKERS:** Does the content of the ADDITIONAL TRAINING materials meet the criteria listed in 170.130(d)(4)? 103
- NA Y N Is trainer qualified to train WORKERS? (certified applicator or authorized by DEC) 26
- Y NA Y N **HANDLERS:** Does the content of the training materials meet the criteria listed in 170.230(c)(4)? 104
- Y NA Y N Is the trainer qualified to train HANDLERS? (certified applicator or authorized by DEC) 26

Who trains workers/handlers? Don / Lloyd When/how often? annually

Comments (explain NA): _____

DECONTAMINATION SITES

The employer must adhere to the following decontamination requirements for **WORKERS** and **HANDLERS**: **40 CFR 170.112/150/250**

- NA Y N Do decontamination sites have soap, single-use towels, and enough water for washing & emergency eye flushing? 29-31
- NA Y N Is the decontamination water of a quality & temperature as required? 29
- NA Y N Is one pint of eye flush water immediately available to handlers using pesticides requiring protective eye wear and to early entry workers when working in areas treated with pesticides requiring protective eye wear for early entry? 31/68
- NA Y N Is the decontamination site within 1/4 mile of the work site and out of areas being treated or under REI? 30/31
- NA Y N Are decontamination sites provided for workers entering treated areas until 30 days following expiration of the REI? 29
(Exception: Pesticides with a four-hour REI require decontamination site for only seven days.)
- Y NA Y N Are decontamination sites provided for early entry workers during and after early entry? 67/68

The employer must adhere to the following decontamination requirements for **HANDLERS**: **40 CFR 170.250**

- NA Y N Is enough water provided to handlers for washing the entire body in case of an emergency? 30
- NA Y N Is one clean change of clothing provided to handlers for use in an emergency? 30
- NA Y N Are decontamination supplies located at the mix/load site? 30/31
- Y NA Y N Are decontamination supplies for PILOTS kept in the airplane or at the aircraft loading site? 30
- NA Y N Are handler decontamination supplies kept out of treated areas unless they are in enclosed containers? 31
- NA Y N Are decontamination supplies located where handlers remove PPE for washing thoroughly after handling activities? 31

Comments (explain NA): _____

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ADDITIONAL DUTIES FOR WORKER EMPLOYERS

40 CFR 170.110

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RESTRICTIONS DURING APPLICATIONS

- ☐ NA ☒ Y ☐ N Are workers prohibited in treated areas during application and until REIs have expired? 45
- ☒ NA ☒ Y ☐ N Are workers prohibited in treated areas plus the additional buffer area during application in NURSERIES? 51/52
- ☒ NA ☒ Y ☐ N Are workers prohibited in a GREENHOUSE during application and until ventilation criteria are met? 53-55

NOTICE OF APPLICATIONS TO WORKERS

40 CFR 170.120

- ☒ NA ☒ Y ☐ N Are all GREENHOUSE applications posted with WPS warning signs? 42
- ☐ NA ☒ Y ☐ N Are workers given BOTH oral and posted notification when required by the pesticide label? 41-44
- ☐ NA ☒ Y ☐ N Are workers given notification of applications (EITHER orally or posted) for other applications? 41-44
- ☐ NA ☒ Y ☐ N Are workers told which method will be routinely used at this firm (oral or posted notification)? - circle one 41

Who notifies workers? Lloyd Yager

- ☐ NA ☒ Y ☐ N Have any early entry activities occurred?
- ☒ NA ☒ Y ☐ N Were workers informed of label restrictions re: early entry?

Posted Warning Signs ☐ NA for all

- ☐ NA ☒ Y ☐ N Does the employer use the approved WPS warning signs for posted notification? 42/43
- ☐ NA ☒ Y ☐ N Are the signs posted at all entrances of worker entry to the treated area? 42
- ☐ NA ☒ Y ☐ N Are the signs put up no sooner than 24 hours prior to application? 43
- ☐ NA ☒ Y ☐ N Are the signs removed within three days after the end of the REI? 43
- ☒ NA ☒ Y ☐ N Are the signs posted along the border of any labor camp adjacent to the treated area? 42

Oral Warnings ☐ NA for all

- ☐ NA ☒ Y ☐ N Are oral warnings given in a language (s) understood by workers? 44
- ☐ NA ☒ Y ☐ N Do oral warnings include: 1) location & description of treated area; 2) REI; 3) instructions not to enter during the REI? 44

Comments (explain NA):

ADDITIONAL DUTIES FOR HANDLER EMPLOYERS

APPLICATION RESTRICTIONS & MONITORING ☐ NA if no handlers employed **40 CFR 170.210**

- ☐ NA ☒ Y ☐ N *Do both the employer & the handler assure that no pesticide is applied (either directly or through drift) so as to contact anyone other than trained and PPE-equipped handlers: 73
- How is this verified? _____
- ☐ NA ☒ Y ☐ N Are handlers monitored visually or by voice every two hours when handling SKULL & CROSSBONES pesticides? 73
- ☒ NA ☒ Y ☐ N Does the handler have a continuous visual or voice contact with another trained and PPE-equipped handler when handling a FUMIGANT in a GREENHOUSE? 73/74

SPECIFIC INSTRUCTIONS FOR HANDLERS ☐ NA if no handlers employed **40 CFR 170.232**

- ☐ NA ☒ Y ☐ N Does the employer assure that handlers read the label or are informed (in a manner they can understand) about the label requirements for safe use before performing any handling activity? 75
- ☐ NA ☒ Y ☐ N Does the handler have access to the product labeling during handling activities? 75

SAFE OPERATION OF EQUIPMENT ☐ NA if no handlers employed **40 CFR 170.234**

- ☐ NA ☒ Y ☐ N Is the handler instructed in the safe operation of handling equipment before it is used? By whom? _____ 75
- ☐ NA ☒ Y ☐ N Is handling equipment inspected and repaired before each day of use? 77
- ☐ NA ☒ Y ☐ N Does the employer assure that only trained and PPE-equipped handlers repair, clean or adjust any handling equipment that contains pesticides or pesticide residues? 77

Comments (explain NA):

PERSONAL PROTECTIVE EQUIPMENT REQUIREMENTS FOR HANDLERS/EARLY ENTRY WORKERS**40 CFR 170.112/240**

- NA Y N Does the employer provide the handler/early entry workers with the appropriate PPE in clean and operating condition? 79
- NA Y N Does the employer assure that instruction on use and cleaning of PPE is given and that it is worn and used correctly? 79
- Who gives instructions and assures use of PPE? _____
- NA Y N Does the employer assure that PPE is inspected, cleaned, stored properly & repaired or replaced before each day of use? 79
- NA Y N Does the employer assure that filters are replaced on respirators when required? 80
- NA Y N Do handlers/early entry workers have a clean place to store personal clothing, put on PPE and remove PPE after use? 79
- Where is it located? _____
- NA Y N Is contaminated PPE disposed of properly? 79
- NA Y N Does the employer take appropriate measures to prevent heat-related illness for handlers/early entry workers using PPE? 79
- NA Y N Have handlers refused to wear proper PPE? _____

From labels of agricultural pesticides documented in an accompanying AUO inspection, list the following (for up to 4 products):

	Product Name	REI	PPE
1	Captan 80 WDG	24	coveralls, eyewear, gloves, shoes & socks
2	Carbaryl 4L	12	long shirt, pants, gloves, shoes & socks
3	Yellow sulfur	24	"
4	Sulfur		

If the label for any of the above products does not include agricultural use requirements - state so above.

Comments (explain NA):

WORKER AND HANDLER INTERVIEWS

- Y N Were any workers or handlers interviewed? (circle which were) If no for either, explain why an interview was not conducted.

no workers on site / only 2 handlers both present @
interviews

FAMILY ESTABLISHMENTS**40 CFR 170.104/110/112/124/224/240**

- NA Y N Are employees only spouse, children, stepchildren, foster children, parents, stepparents, foster parents, brothers, sisters? 91
- If NO, skip this section.
- NA Y N Are non-handlers prohibited in treated areas during application and until REIs have expired? 92
- NA Y N Are non-handlers prohibited in treated areas plus the additional buffer area during application in NURSERIES? 92
- NA Y N Are non-handlers prohibited in a GREENHOUSE during application and until ventilation criteria are met? 92
- NA Y N Are early entry workers prohibited in treated areas during the first four hours after application? 93
- NA Y N Are early entry workers limited to one hour of work in a 24-hour period in treated areas during the REI? 93
- NA Y N Are early entry workers who perform irrigation and limited contact activities limited to eight hours of work in a 24-hour period? 93
- NA Y N Is the correct PPE for early entry PROVIDED for early entry activities at this firm? 93
- NA Y N Does the handler at this firm wear the label-specified PPE during handling tasks? 92
- NA Y N Is the label-specified PPE for handling activities at this firm PROVIDED in clean and operating condition? 92
- NA Y N Does this establishment notify commercial handlers regarding location of treated areas and REIs on the establishment? 92
- NA Y N Do commercial handlers notify this establishment of required application information before application takes place? 92

Comments (explain NA):

Additional Comments:

Print name of inspector Amy Allen	Print name of person interviewed JON E YAGER
Signature of inspector [Signature]	Signature of person interviewed [Signature]